FORM PFS - LOCAL PERSONAL FINANCIAL STATEMENT **COVER SHEET** PAGE 1 TOTAL NUMBER OF PAGES FILED. Filed in accordance with chapter 572 of the Government Code. For filings required in 2019, covering calendar year ending December 31, 2018. Filer ID Use FORM PFS--INSTRUCTION GUIDE when completing this form. 1 NAME OFFICE USE ONLY MRS. Emily 5 Date Received 2 ADDRESS 1700 COLDERO Ct. Denton TX 76210 Date Hand-delivered or Date Postmarked Amount \$ AREA CODE PHONE NUMBER; EXTENSION Date Processed TELEPHONE NUMBER (817)793-3884 Date imaged REASON MCANDIDATE PENTON City Council Place 4 FOR FILING **STATEMENT** ELECTED OFFICER ______ (INDICATE OFFICE) OTHER ______ (INDICATE POSITION) Family members whose financial activity you are reporting (see instructions). ERIC J. MEIGNER DEPENDENT CHILD 1. In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions). COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

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PERSONAL FINANCIAL STATEMENT

COVER SHEET PAGE 2

On this page, indicate any Parts of Form PFS that are not applicable to you. If you do not place a check in a box, then pages for that Part must be included in the report. If you place a check in a box, do NOT include pages for that Part in the report.

6	PARTS	NOT APPLICABLE TO FILER
	□ N/A	Part 1A - Sources of Occupational Income
	N/A	Part 1B - Retainers
	□ N/A	Part 2 - Stock
	₩ N/A	Part 3 - Bonds, Notes & Other Commercial Paper
	□ N/A	Part 4 - Mutual Funds
	□ N/A	Part 5 - Income from Interest, Dividends, Royalties & Rents
	N/A N/A	Part 6 - Personal Notes and Lease Agreements
	□ N/A	Part 7A - Interests in Real Property
	50 N/A	Part 7B - Interests in Business Entities
	⅓ N/A	Part 8 - Gifts
	M N/A	Part 9 - Trust Income
	☑ N/A	Part 10A - Blind Trusts
	⊠ N/A	Part 10B - Trustee Statement
	□ N/A	Part 11A - Ownership of Business Associations
	□ N/A	Part 11B - Assets of Business Associations
	□ N/A	Part 11C - Liabilities of Business Associations
	□ N/A	Part 12 - Boards and Executive Positions
	[X] N/A	Part 13 - Expenses Accepted Under Honorarium Exception
	,	Part 14 - Interest in Business in Common with Lobbyist
	DD N/A	Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer
	Ø N/A	Part 16 - Representation by Legislator Before State Agency
	•	Part 17 - Benefits Deríved from Functions Honoring Public Servant
		Part 18 - Legislative Continuances
		Part 19 - Contracts with Governmental Entity
	X N/A	Part 20 - Bond Counsel Fees Paid to Legislator

SOURCES OF OCCUPATIONAL INCOME If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. INFORMATION RELATES TO SPOUSE FILER ☐ DEPENDENT CHILD _ NAME AND ADDRESS OF EMPLOYER / POSITION HELD **EMPLOYMENT** MEIGNER CREATIVE, LCC 1706 CORDERO CT ☐ EMPLOYED BY ANOTHER Dentan TX 76210 GOVERNING MEMBER NATURE OF OCCUPATION SELF-EMPLOYED Video Peoduction INFORMATION RELATES TO FILER SPOUSE DEPENDENT CHILD _ **EMPLOYMENT** MRISHER CREATUR, LLC ■ EMPLOYED BY ANOTHER DENILON TX 70210 Member Video Production SELF-EMPLOYED INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD __ Denton County Elections Administration 701 Kimberly Drive, Suite A101 Denton, TX 74208 **EMPLOYMENT** X EMPLOYED BY ANOTHER SELF-EMPLOYED Poll WORKER, AlternAte Judge (Election)

STOCK If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report. List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS-INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. ¹ BUSINESS ENTITY ² STOCK HELD OR ACQUIRED BY **SPOUSE** FILER ■ DEPENDENT CHILD 3 NUMBER OF SHARES ☐ 500 TO 999 1,000 TO 4,999 K LESS THAN 100 100 TO 499 5,000 TO 9,999 ☐ 10.000 OR MORE 4 IF SOLD P NET GAIN ☐ NET LOSS **BUSINESS ENTITY** STOCK HELD OR ACQUIRED BY TX FILER SPOUSE ☐ 500 TO 999 1,000 TO 4,999 LESS THAN 100 **☎**100 TO 499 NUMBER OF SHARES 5,000 TO 9,999 10.000 OR MORE IF SOLD NET GAIN LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE ☐ NET LOSS **BUSINESS ENTITY** STOCK HELD OR ACQUIRED BY ☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD ___ 1,000 TO 4,999 100 TO 499 ☐ 500 TO 999 NUMBER OF SHARES LESS THAN 100 ☐ 10,000 OR MORE 5,000 TO 9,999 IF SOLD ☐ NET GAIN \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE LESS THAN \$5,000 ☐ NET LOSS **BUSINESS ENTITY** NAME STOCK HELD OR ACQUIRED BY FILER SPOUSE □ DEPENDENT CHILD LESS THAN 100 ☐ 100 TO 499 500 TO 999 1,000 TO 4,999 NUMBER OF SHARES ☐ 10,000 OR MORE 5,000 TO 9,999 IF SOLD ☐ NET GAIN \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE LESS THAN \$5,000 ☐ NET LOSS NAME **BUSINESS ENTITY** STOCK HELD OR ACQUIRED BY ☐ FILER SPOUSE DEPENDENT CHILD __ 100 TO 499 ☐ 500 TO 999 1,000 TO 4,999 NUMBER OF SHARES LESS THAN 100 5,000 TO 9,999 ☐ 10.000 OR MORE IF SOLD NET GAIN LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE □ NET LOSS COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

MUTUAL FUNDS If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report. List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 MUTUAL FUND HARTFORD DALANCED INCUME CL A 2 SHARES OF MUTUAL FUND SPOUSE FILER ☐ DEPENDENT CHILD ___ HELD OR ACQUIRED BY ☐ 500 TO 999 3 NUMBER OF SHARES ☐ 100 TO 499 1,000 TO 4,999 LESS THAN 100 OF MUTUAL FUND 10,000 OR MORE 5.000 TO 9.999 4 IF SOLD ■ NET GAIN LESS THAN \$5,000 \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE ☐ NET LOSS MUTUAL FUND AMERICAN INC FUND OF AMERICA SHARES OF MUTUAL FUND SPOUSE DEPENDENT CHILD _____ FILER HELD OR ACQUIRED BY **™**100 TO 499 NUMBER OF SHARES ☐ 500 TO 999 1,000 TO 4,999 LESS THAN 100 OF MUTUAL FUND

☐ 10,000 OR MORE

SPOUSE

☐ 100 TO 499

☐ 10,000 OR MORE

KLESS THAN \$5,000 S5,000--\$9,999 S10,000--\$24,999 \$25,000--OR MORE

☐ DEPENDENT CHILD _____

500 TO 999

\$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE

5,000 TO 9,999

☐ FILER

LESS THAN 100

5,000 TO 9,999

LESS THAN \$5,000

Forms	provided	hν	Tevas	Effice	Commission

NET GAIN

☐ NET LOSS

□ NET GAIN

☐ NET LOSS

IF SOLD

MUTUAL FUND

SHARES OF MUTUAL FUND

HELD OR ACQUIRED BY

NUMBER OF SHARES

OF MUTUAL FUND

IF SOLD

1,000 TO 4,999

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this** page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS—INSTRUCTION GUIDE.

1 MUTUAL FUND	JPMORGIAN CORE BOND			
² SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	Filer	SPOUSE DEPENDENT CHILD		
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 10,000 OR MORE		
4 IF SOLD ⊠ NET GAIN ☐ NET LOSS	TESS THAN \$5,000	\$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE		
MUTUAL FUND	J1	MORGIAN CORE PLUS BOND		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE DEPENDENT CHILD		
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 10,000 OR MORE		
IF SOLD ⊠ NET GAIN ☐ NET LOSS	TESS THAN \$5,000	\$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE		
MUTUAL FUND		NAME		
WOTONEL STIE	M FC	lorgian Equity Income		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE DEPENDENT CHILD		
NUMBER OF SHARES	Excless than 100	☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999		
OF MUTUAL FUND	5,000 TO 9,999	☐ 10,000 OR MORE		
IF SOLD ☐ NET GAIN	TESS THAN \$5,000	\$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE		
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY				

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List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

providing the number under which the	child is listed on the Co	over oneet.				
1 MUTUAL FUND	Lord		T CORE FIXED INCOME			
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	PILER	SPOUSE	DEPENDENT CHILD			
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	∑ 100 TO 499	☐ 500 TO 999 ☐ 1,000 TO 4,999			
	5,000 TO 9,999	☐ 10,000 OR MOF	RE			
4 IF SOLD ⊠ NET GAIN ☐ NET LOSS	CESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999 \$25,000OR MORE			
MUTUAL FUND	MFS		ME JAtion Al Diversification			
			1 1 1 1 0 10			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	(XFILER	SPOUSE	DEPENDENT CHILD			
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	500 TO 999 1,000 TO 4,999			
	☐ 5,000 TO 9,999	10,000 OR MOF	RE			
IF SOLD -⊠ NET GAIN	⊠LESS THAN \$5,000	\$5,000 \$ 9,999	\$10,000\$24,999 \$25,000OR MORE			
MUTUAL FUND		NA	ME			
	MFS	VALUE				
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHILD			
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	500 TO 999 1,000 TO 4,999			
OF MOTORET SIND	☐ 5,000 TO 9,999	☐ 10,000 OR MOF	RE			
IF SOLD ☐ NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999 \$25,000OR MORE			
COPY	COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this** page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 MUTUAL FUND	Americ	AMERICAN EUROPACIFIC GROWN				
² SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☐ FILER	SPOUSE	DEPENDENT CHI	LD		
3 NUMBER OF SHARES OF MUTUAL FUND	☑ LESS THAN 100 ☐ 5,000 TO 9,999	☐ 100 TO 499	□ 500 TO 999	☐ 1,000 TO 4,999		
4 IF SOLD ■ NET GAIN □ NET LOSS	₩ LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE		
MUTUAL FUND	America	WAShinu	HE WILMY	INVASTOR		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHI	LD		
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	□ 500 TO 999	☐ 1,000 TO 4,999		
IF SOLD ✓ NET GAIN ☐ NET LOSS	₩ LESS THAN \$5,000	\$5,000\$9,999	\$10,000 \$24,99 9	\$25,000OR MORE		
MUTUAL FUND	HARLFOR	2D Equiti	y Income	1		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	LD		
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	☐ 500 TO 999	☐ 1,000 TO 4,999		
IF SOLD ☐ NET GAIN	LESS THAN \$5,000	\$5,000 \$ 9,999	\$10,000 \$24 ,999	☐ \$25,000OR MORE		
COP	COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

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List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS-INSTRUCTION GUIDE.

1 MUTUAL FUND	TROWE PRICE U.S. TEASURY MONEY				
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE DEPENDENT CHILD			
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100				
4 IF SOLD NET GAIN	ALESS THAN \$5,000	\$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE			
MUTUAL FUND	AMERICA	V Europacific Growth			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE DEPENDENT CHILD			
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499 ☐ 500 TO 999 ☐ 1,000 TO 4,999 ☐ 10,000 OR MORE			
IF SOLD ☐ NET GAIN	☑ LESS THAN \$5,000	\$5,000\$9,999\$10,000\$24,999\$25,000OR MORE			
MUTUAL FUND		NAME			
	AMERICAN	INTERMEDIALE BOND FIND OF AMERICA			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE DEPENDENT CHILD			
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	↑ 100 TO 499			
IF SOLD ☐ NET GAIN	Excess THAN \$5,000	\$5,000\$9,999 \$10,000\$24,999 \$25,000OR MORE			
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.**

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 MUTUAL FUND	AMERICAN	WAShinush		1 INDEGHOR		
2 SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D		
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999 E	☐ 1,000 TO 4,999		
4 IF SOLD NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE		
MUTUAL FUND	Hartfor	o Equiti	y Incoma			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D		
NUMBER OF SHARES OF MUTUAL FUND	☐ 5,000 TO 9,999	☐ 100 TO 499	☐ 500 TO 999 E	☐ 1,000 TO 4,999		
IF SOLD ☐ NET GAIN	ESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	S25,000OR MORE		
MUTUAL FUND		NAI	ME			
	JP MO	RUNN CO	RE BOND			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	D		
NUMBER OF SHARES	LESS THAN 100	★ 100 TO 499	☐ 500 TO 999	1,000 TO 4,999		
OF MUTUAL FUND	5,000 TO 9,999	10,000 OR MOR	Ē			
IF SOLD	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE		
™ NET LOSS	- \					
COPY	COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.**

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 MUTUAL FUND	JP MORGAN COREPLUS BOND				
² SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☐ FILER	SPOUSE	DEPENDENT CHIL		
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 10,000 OR MOR	□ 500 TO 999	☐ 1,000 TO 4,999	
4 IF SOLD ☐ NET GAIN MET LOSS	KLESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE	
MUTUAL FUND	JP Ma	ORGAN E	a uity In	COME	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	_D	
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499	□ 500 TO 999 E	1,000 TO 4,999	
IF SOLD ☑ NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	S25,000OR MORE	
MUTUAL FUND	LORD A'	blost Corus	me 3 FIXEIW	COMP	
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	☐ FILER	SPOUSE	DEPENDENT CHIL		
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499	☐ 500 TO 999 E	1,000 TO 4,999	
IF SOLD ☐ NET GAIN	LESS THAN \$5,000			\$25,000OR MORE	
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.**

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS-INSTRUCTION GUIDE.

1 MUTUAL FUND	MFS International DEVERSICICATION					
² SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D		
3 NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999 E	1,000 TO 4,999		
4 IF SOLD ☑ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000\$9,999	\$10,000 \$24 ,999	\$25,000OR MORE		
MUTUAL FUND	MFSVI	ALUE NA	ME			
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D		
NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	☐ 100 TO 499 ☐ 10,000 OR MOR	☐ 500 TO 999 E	☐ 1,000 TO 4,999		
IF SOLD ■ NET GAIN	CESS THAN \$5,000	\$5,000\$9,999	\$10,000 \$24, 999	\$25,000OR MORE		
MUTUAL FUND	TROWE	PRICE U		SURP MONKY		
SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	SPOUSE	DEPENDENT CHIL	.D		
NUMBER OF SHARES OF MUTUAL FUND	☐ LESS THAN 100 ☐ 5,000 TO 9,999	100 TO 499	☐ 500 TO 999 E	☐ 1,000 TO 4,999		
IF SOLD ⊠NET GAIN	LESS THAN \$5,000	\$5,000\$9,999	\$10,000\$24,999	\$25,000OR MORE		
COPY	COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY					

INTERESTS IN REAL PROPERTY

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this** page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS-INSTRUCTION GUIDE.

providing the number under which the child is listed on the Cover Sheet.							
1 HELD OR ACQUIRED BY	☑ FILER ☑ SPOUSE ☐ DEPENDENT CHILD						
² STREETADDRESS ☐ NOTAVAILABLE	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE 1700 COLDEVZO CT DENION TX 70210						
3 DESCRIPTION ☑ LOTS ☐ ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED LOT LUMESTEAD						
A NAMES OF PERSONS RETAINING AN INTEREST NOTAPPLICABLE (SEVERED MINERAL INTEREST)	BB+T (Mortgage)						
F SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 🔀 \$25,000OR MORE						
HELD OR ACQUIRED BY	☐ FILER ☐ SPOUSE ☐ DEPENDENT CHILD						
STREET ADDRESS NOT AVAILABLE	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE						
DESCRIPTION LOTS ACRES	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED						
NAMES OF PERSONS RETAINING AN INTEREST NOTAPPLICABLE (SEVERED MINERAL INTEREST)							
IF SOLD NET GAIN NET LOSS	☐ LESS THAN \$5,000 ☐ \$5,000\$9,999 ☐ \$10,000\$24,999 ☐ \$25,000OR MORE						
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY							

PART 11A OWNERSHIP OF BUSINESS ASSOCIATIONS If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet and DO NOT include this page in the report. Describe each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 5 percent or more of the outstanding ownership. For more information, see FORM PFS - INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. MRISHRE ORRATIVE, C.C.C 1 BUSINESS ASSOCIATION 700 COLDERO CT DENION TX 76210 Professional Association Limited Partnership 2 BUSINESS TYPE Corporation Firm Limited Liability Partnership Joint Venture Other _________ Partnership Professional Corporation 3 HELD, ACQUIRED, OR SOLD BY T FILER SPOUSE DEPENDENT CHILD __ NAME AND ADDRESS **BUSINESS ASSOCIATION** Professional Association **BUSINESS TYPE** Corporation Limited Partnership Limited Liability Partnership Joint Venture Firm Other _ Professional Corporation Partnership HELD, ACQUIRED, FILER SPOUSE DEPENDENT CHILD OR SOLD BY NAME AND ADDRESS **BUSINESS ASSOCIATION** Professional Association **BUSINESS TYPE** Corporation Limited Partnership ☐ Joint Venture Limited Liability Partnership Firm Other _ Professional Corporation Partnership HELD, ACQUIRED, ☐ FILER SPOUSE DEPENDENT CHILD OR SOLD BY NAME AND ADDRESS **BUSINESS ASSOCIATION** (check if Filer's Home Address) Limited Partnership Professional Association **BUSINESS TYPE** Corporation Joint Venture Firm Limited Liability Partnership Other _ Partnership Professional Corporation HELD, ACQUIRED, FILER SPOUSE DEPENDENT CHILD ___ OR SOLD BY COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY

ASSETS OF BUSINESS ASSOCIATIONS PART 11B If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and do NOT include this page in the report. Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. **BUSINESS** MEISNER CREATIVE, LLC 1700 CURREDO CH DENTUN TX 16210 ASSOCIATION ² BUSINESS TYPE 3 HELD, ACQUIRED, SPOUSE FILER DEPENDENT CHILD — OR SOLD BY 4 ASSETS DESCRIPTION CATEGORY LESS THAN \$5,000 \$5,000--\$9,999 VIDEO Equipment \$10,000--\$24,999 \$25,000--OR MORE X LESS THAN \$5,000 ☐ \$5,000--\$9,999 \$10,000--\$24,999 ☐ \$25,000--OR MORE LESS THAN \$5,000 S5,000--\$9,999 \$25,000--OR MORE \$10,000--\$24,999 LESS THAN \$5,000 \$5,000--\$9,999 **\$10,000--\$24,999** \$25,000--OR MORE LESS THAN \$5,000 S5,000--\$9,999 \$10,000--\$24,999 ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 \$10,000--\$24,999 \$25,000--OR MORE ☐ LESS THAN \$5,000 ☐ \$5,000--\$9,999 **\$10,000--\$24,999** ☐ \$25,000--OR MORE LESS THAN \$5,000 \$5,000--\$9,999

\$10,000--\$24,999

\$25,000--OR MORE

LIABILITIES OF BUSINESS ASSOCIATIONS

PART 11C

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this** page in the report.

Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the liabilities. For more information, see FORM PFS--INSTRUCTION GUIDE.

providing the number under	a willon the ciliu is its	sted on the Cover Sheet.				
¹ BUSINESS ASSOCIATION	MRISNER CREATIVE, LLC 1700 CORDERO CH DENTON TX 76210					
		1 100 COKDERD	Ct Uniter 1X	14210		
² BUSINESS TYPE						
³ HELD, ACQUIRED, OR SOLD BY	FILER	⊘ ≪spouse	DEPENDENT	CHILD		
4 LIABILITIES	DE	ESCRIPTION	CATE	GORY		
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			\$10,000 \$24 ,999	☐ \$25,000OR MORE		
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BOARDS AND EXECUTIVE POSITIONS

PART 12

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.**

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 ORGANIZATION	MEIGNER	CRENTIVE, LLC	/						
² POSITION HELD		OUT MAMBER							
³ POSITION HELD BY	☐ FILER	SPOUSE	DEPENDENT CHILD						
ORGANIZATION	MEIGNBR CO	2RATIVE, LLC							
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ORGANIZATION									
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POSITION HELD BY	FILER	SPOUSE	DEPENDENT CHILD						
COPY AND ATTACH ADDITIONAL PAGES AS NECESSARY									

PERSONAL FINANCIAL STATEMENT AFFIDAVIT

The law requires the personal financial statement to be verified. The verification page must have the signature of the individual required to file the personal financial statement, as well as the signature and stamp or seal of office of a notary public or other person authorized by law to administer oaths and affirmations. Without proper verification, the statement is not considered filed.

I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2018, and is true and correct and includes all information required to be reported by me under chapter 572 of the Government Code.

Anily Meisner Signature of Filer

JANE E. RICHARDSON
Notary Public, State of Texas
Comm. Expires 06-27-2021
Notary ID 8251214

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said <u>Fmily Meisner</u>, this the <u>6th</u> day of <u>March</u>, 20 19, to certify which, witness my hand and seal of office.

Jane E. Richardson Notary Public

Senature of officer administering oath Printed name of officer administering oath Title of officer administering oath

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	j.				